

Remarks

Reconsideration and reversal of the rejections expressed in the Office Action of January 13, 2004 is respectfully requested in light of the following.

Claims 1-8 and 10-20 are solicited, wherein claims 8, 10, and 17 have been amended and claim 9 has been canceled. More particularly, claims 8 and 10 have been amended to further distinguish the claimed invention over the prior art. Claim 17 has been amended to correct a clerical error and, as such, its intended scope of protection has not been narrowed.

In the aforementioned Office Action, the Examiner objected to the title of the invention as not being descriptive. As suggested by the Examiner, the title has been amended to “HOSPITAL PRONING BED.” As noted above, claim 17 has been amended and now recites at line 1 “the anterior body portion” as suggested by the Examiner.

Claims 1-3, 8, 14, 15, 16, 19, and 20 have been rejected under 35 U.S.C. § 102(b) as being anticipated by PCT Application Publication No. WO99/07320 (hereinafter “PCT Application Publication”).

The PCT Application Publication discloses a bed 10 including a support assembly 22 supporting a patient support assembly 26 in a cantilevered fashion. Patient support assembly 26 includes a pair of horizontally extending arms 42 and 44 and a patient support surface 50 which is coupled between the arms 42 and 44. As illustrated in Fig. 5, the arms 42 and 44 may include arms 102 and 104 which are hollow receptacles, the remainder of the patient support assembly 26 includes arm extensions 106 and 108 which slide into the open ends of receptacle arms 102 and 104. A lower set of doors 110, including a first door 148 and a second door 150, supports the patient support surface 50 for holding the patient in a supine position. Illustratively, a pair of air bladders 170 are located on an inner surface of the doors 148 and 150. An upper set of doors 112 similarly include a first door 172 and a second door 174. A first lifting apparatus 114 is coupled to arm 42, and a second lifting apparatus 116 is coupled to arm 44. Door 172 includes a first portion 176 pivotally coupled to the first lifting apparatus 114 by hinge 178, and a second portion 180 pivotally coupled to first portion 176 by hinge 182. Door 174 includes a first portion 184 coupled to second lifting apparatus 116 by hinge 186, and a second portion 188 pivotally coupled to first portion 184 by hinge 190. Air bladders 196 are coupled to second door portions 180 and 188.

The PCT Application Publication simply does not disclose, teach or suggest a bed as recited in claim 1. More particularly, there is simply no disclosure, hint or suggestion in the PCT Application Publication of a bed including “an anterior bed support coupled to the

posterior bed support, the anterior bed support including an anterior body portion, an anterior support plate configured to be removably coupled to the anterior body portion and supported for sliding movement into the anterior body portion.” As detailed above, the anterior bed support of the PCT Application Publication comprises first and second doors 172 and 174 which are pivotally coupled to first and second lifting apparatus 114 and 116, respectively. As such, the anterior bed support does not include an anterior support plate configured to be removably coupled to the anterior body portion and supported for sliding movement into the anterior body portion. For at least these reasons, it is respectfully submitted that claim 1, and the claims dependent therefrom, are properly allowable over the PCT Application Publication.

Claim 16 is believed to be in condition for allowance for the reasons provided above with respect to claim 1. More particularly, claim 16 recites, and the PCT Application Publication fails to disclose, teach or suggest a bed including “an anterior bed support coupled to the posterior bed support, the anterior bed support including an anterior body portion, an anterior support plate configured to be removably coupled to the anterior body portion and supported for sliding movement into the anterior body portion,” either alone or in combination with “a guide configured to operably couple with the anterior support plate in order to guide the anterior support plate in sliding movement.” For at least these reasons, it is respectfully submitted that claim 16, and the claims dependent therefrom, are properly allowable over the PCT Application Publication.

Claims 1-3, 8, 14, 15, 16, 19, and 20 have been rejected under 35 U.S.C. § 102(b) as being anticipated by U.S. Patent No. 3,302,218 to Stryker (hereinafter “Stryker”).

Stryker discloses a turning frame 10 including support mechanisms 16 and 17 mounted on posts 12 and 13, respectively, for the purpose of engaging and positioning a pair of elongated patient engaging members or supports 18 and 19 so they can be rotated together. An arcuate, tubular support member 71, which is part of the support mechanism 16, is secured, preferably proximately mid-way between its opposite ends upon the upper end of the post 12. Four rollers are mounted in sets 72, 73 and 74, 75 near the upper side of the support member 71 and near its opposite ends for cradling and rotatably supporting a circular member 77, preferably for rotation substantially around the axis of the pivot sleeve 46 and substantially concentric with the support member 71.

The circular member 77 is divided into substantially semi-circular segments 83 and 84 which are pivotally connected at one set of corresponding ends by a pivot pin 86 and

releasably connected at their other corresponding ends by a locking mechanism 87. A substantially U-shaped hanger 102 is secured to the posterior segment 84 so that it opens upwardly. A screw 55 and cooperating nut 60 are configured to hold the head end of the posterior support 19 with respect to the post 13. A substantially U-shaped hanger 142 is coupled to the anterior segment 83.

Stryker does not disclose, teach or suggest a bed as recited in claim 1. More particularly, there is simply no disclosure, hint or suggestion in Stryker of “a posterior support plate configured to be removably coupled to the posterior body portion and supported for sliding movement into the posterior body portion” either alone or in combination with “an anterior support plate configured to be removably coupled to the anterior body portion and supported for sliding movement into the anterior body portion.” As detailed above, the posterior patient support 19 is secured to the post 13 by way of a screw 55 and nut 60. As further detailed in Stryker beginning at Col. 10, line 56, in order to receive a patient, the anterior segment 83 is pulled upwardly away from the posterior segment 84 to provide unobstructed access to the patient support. There is simply no disclosure or suggestion in Stryker of a structure configured to provide sliding of either patient supports 18 and 19 into a respective posterior body portion or anterior body portion.

For at least these reasons, it is respectfully submitted that claim 1, and the claims dependent therefrom are in condition for allowance.

For the reasons provided above with respect to claim 1, it is respectfully submitted that claim 16, and the claims dependent therefrom, are in condition for allowance. More particularly, there is simply no disclosure or suggestion in Stryker of providing a bed including an “anterior bed support including an anterior body portion, an anterior support plate configured to be removably coupled to the anterior body portion and supported for sliding movement into the anterior body portion,” either alone or in combination with “a guide configured to operably couple with the anterior support plate in order to guide the anterior support plate in sliding movement.”

Independent claim 8 has been amended to incorporate the subject matter of dependent claim 9. Claim 9 was found by the Examiner to contain allowable subject matter. As such, it is respectfully submitted that claim 9 is in proper condition for allowance.

Similarly, dependent claim 10 has been rewritten in independent form. Claim 10 was found to contain allowable subject matter by the Examiner. As such, it is respectfully submitted that claim 10 is in proper condition for allowance.

Claims 1-5 have been rejected under the judicially created doctrine of obviousness-type double patenting as being unpatentable over claims 1-3, 5-8, 10, 15, 16, and 26-31 of U.S. Patent No. 6,609,260.

The present application and U.S. Patent No. 6,609,260 are commonly owned by Hill-Rom Services, Inc. Included with this response is a terminal disclaimer, disclaiming the terminal part of any statutory term of any patent granted on the instant application, which would extend beyond the expiration date of the full statutory term defined in 35 U.S.C. §§ 154-156 and 173 of U.S. Patent No. 6,609,260. By filing the above-identified terminal disclaimer, the applicants are not acquiescing in the Examiner's determination of double patenting, but are rather expediting the issuance of a patent from the instant application.

Accordingly, applicants respectfully submit that the above obviousness-type double patenting rejection is moot.

Claims 1-8 and 10-20 are believed to be in condition for allowance. Such allowance is respectfully requested.

If necessary, please consider this a Petition for Extension of Time to effect a timely response. Please charge any additional fees or credits to the account of Bose McKinney & Evans, LLP Deposit Account No. 02-3223.

In the event that there are any questions related to this response or to the application in general, the undersigned would appreciate the opportunity to address those questions directly in a telephone interview to expedite the prosecution of this application for all concerned.

Respectfully submitted,
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